

Culture Change: Balancing Protective Oversight with Resident's Rights



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Culture Change in Long-Term Care


Culture Change is the transformation from institutions, where care is provided according to the dictates of the caregiver and the facility schedule, to homes, where individuals receive assistance to live as they choose.



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Core Person-Centered Values of Culture Change

- § Choice
 - § Dignity
 - § Respect
 - § Self-Determination
 - § Purposeful Living
 - § Privacy
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Culture Change and Survey

The culture change movement has created an expectation of person-centered care and honoring residents' rights and individuality in long-term care.

The movement has also brought about an increased awareness by surveyors of the negative impact felt by residents when homes fail to provide person-centered care. This is resulting in a gradually increasing enforcement of regulatory requirements related to practices that restrict residents' freedoms without individual assessment and documented justification.





Protective Oversight

Each resident shall receive 24-hour protective oversight and supervision.

RCF I – 19 CSR 30-86.042 (39)

RCF II – 19 CSR 30-86.043 (34)

ALF – 19 CSR 30-86.047 (35)

SNF/ICF – 19 CSR 30-85.042 (66)



United States Constitution

Amendment V

No person shall be... deprived of life, liberty, or property, without due process of law...;





Resident's Rights

Each resident shall be encouraged and assisted, throughout his or her period of stay, to exercise his or her rights as a resident and as a citizen...

19 CSR 30-88.010 (20)




Resident's Rights

Each resident shall be treated with consideration, respect, and full recognition of his or her dignity and individuality...

19 CSR 30-88.010 (29)



Restrictions Imposed by Rules or Policies




Residents shall not have their personal lives regulated or controlled beyond reasonable adherence to meal schedules and other written policies which may be necessary for the orderly management of the facility and the personal safety of the residents.

19 CSR 30-88.010 (41)



Individual Restrictions

Individual restrictions must be based on individual assessment. Justification for such restrictions must be supported by documentation in the resident's record.



RCF I – 19 CSR 30-86.042 (62)

RCF II – 19CSR 30-86.043 (58)

ALF – 19 CSR 30-86.047 (58)

SNF/ ICF – 19 CSR 30-85.042 (99) (100)



Guardianship

Appointment of guardian is based on an individual's inability to meet "some or all of his essential requirements for food, clothing, shelter, safety or other care so that serious physical injury, illness, or disease is likely to occur..." 475.075RSMo






Duties of Guardian

Assure that the ward resides in the best and least restrictive setting reasonably available.

475.120RSMo



There shall be imposed on the personal liberty of the ward only such restraint as is necessary to prevent the ward from injuring himself or herself and other and to provide the ward with such care, habilitation and treatment as are appropriate for the ward considering his or her physical and mental condition and financial means.

475.010RSMO



Guardianship

Will the decision likely result in serious physical injury, illness, or disease to the individual or injury to others?

If the answer to this question is no, then it is likely within the individual's right to make the decision.





Guardianship


There is nothing in guardianship laws that alleviate the home from compliance with LTC regulatory requirements. If you cannot meet the individual's needs within the confines of the regulatory requirements, then he/she is inappropriately placed.





Administrator's Responsibilities

It is the administrator's responsibility to ensure that any restrictions imposed by a guardian are within regulatory compliance and are necessary based on individual assessment.



RCF I – 19 CSR 30-86.042 (4)

RCF II – 19 CSR 30-86.043 (4)

ALF – 19 CSR 30-86.047 (6)

SNF – 19 SCR 30-85.042 (3)




Survey

- § Observe impact on resident's quality of life.
- § Interview residents, staff, family, and guardians.
- § Review documentation supporting restrictions.





Survey Probes

- § Was the resident/representative actively involved in the decision or simply informed or asked for approval?
 - § Is it necessary to prevent injury or provide appropriate care, habilitation, or treatment?
 - § Was the resident's individuality considered?
 - § Were potential negative impacts considered, such as loss of dignity, respect or liberty?
 - § Did the administrator advocate for less restrictive alternatives?
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Culture Change Resources

- § MC5 - <http://www.momc5.com/>
 - § Pioneer Network - <http://www.pioneernetwork.net/>
 - § Long-Term Care Improvement Guide
<http://www.residentcenteredcare.org/Pages/About%20the%20guide.html>
 - § SLCR Blog - https://health.mo.gov/ltcblog/?page_id=417
 - § SLCR Weekly Update – <http://health.mo.gov/seniors/seniorservices/>
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